



هيئة الصحة
HEALTH AUTHORITY

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1. Purpose

1.1 This Standard mandates the requirement to report to HAAD all Public Health Data defined in this Standard and the means by which to submit the reports to HAAD. It aims to ensure the following:

- 1.1.1 All the necessary Public Health data are captured to assess the health of the Abu Dhabi population;
- 1.1.2 Support Public Health analysis of current and future health challenges and their impact
- 1.1.3 Enable prioritising and establishing appropriate preventative and treatment interventions.

2 Scope

2.1 This standard applies to all Healthcare Facilities and Professionals licensed by HAAD in the Emirate of Abu Dhabi.

3 Definitions

- 3.1 **Public Health Data** – comprise of a set of demographic and health information data pertaining to matters of public health including mortality and morbidity that are recorded for all birth and death events. They comprise of information and screening activities collected throughout the life cycle of individuals and communities including, but not limited to, antenatal and preconception, new born babies and preschool age children, school age students, injury and poisoning and notifiable communicable diseases.
- 3.2 **Public Health Data Reporting** -Data for each of the defined variables on mortality and morbidity recorded against mandated data fields specified by HAAD in the HAAD electronic notification system at <http://www.haad.ae/haad/tabid/871/Default.aspx>.
- 3.3 **Live Birth** is defined as the event of birth of a live infant.
- 3.4 **Live Born infant** is a newborn who shows signs of life directly after birth regardless of the length of pregnancy.

- 3.5 **Still born infant** is a newborn who does not show signs of life directly after birth, provided that the length of pregnancy is not less than twenty eight weeks.
- 3.6 **Intrauterine Fetal Death (IUFD)** is a still born infant who does not show signs of life directly after birth, provided that the length of pregnancy is not less than twenty eight weeks.
- 3.7 **Deceased is** an individual who has sustained permanent irreversible cessation of all vital functions. A determination of death must be made in accordance with accepted medical standards.
- 3.8 **New Born Screening** – is a defined set of requirements for new born babies comprised of comprehensive physical examination, hearing screening, critical congenital heart disease screening and laboratory screening specimen (heel prick test) and follow up care as established by the HAAD for New Born Baby Screening.
- 3.9 **Antenatal Screening (including preconception)** – is a defined screening schedule for pre-conception and antenatal screening requirements as established by the HAAD Standard for Routine Antenatal Screening and Care.
- 3.10 **School Health Screening** – is a defined screening schedule for school students, Grades 1 – 12, as established by the HAAD Standard for School Health Screening.
- 3.11 **Well-Child Visit** – is a defined recommended schedule of screening for infants and children aged 0-6 years as specified by the HAAD Standard for Well Child visits (0-6 years).
- 3.12 **Non –fatal Injury** - all kinds of injuries; defined for the purposes of the HAAD injury reporting as the injury identified on first patient encounter at a HAAD licensed healthcare facility as per the diagnosis code ICD-9CM 800-999 or ICD-10 (V01 – Y98 are specific ICD 10 codes for injuries / poisoning and should be used preferably; S00-T98 are codes for consequences of injury and poisoning).
- 3.13 **Poisoning** -an occurrence when a poison interferes with normal body functions after it is swallowed, inhaled, injected, or absorbed. A poison is a substance that, on ingestion, inhalation, absorption, application, injection, or development within the body, may cause structural damage or functional disturbance.
- 3.14 **Notifiable Communicable Diseases** - refers to a list of infectious diseases as defined by Federal Law No. (27) Of 1981 Concerning Protection from Communicable Diseases, and Cabinet Decision No. (33) Of 2009 promulgating the bylaw of the medical liability Law no. 10, 2008; and as determined and revised by HAAD. The federal law and HAAD mandate the reporting of suspected and confirmed infectious diseases by physicians, nurses, infection control practitioners, laboratorians, health care facility administrators, and other health care professionals in accordance with specifications detailed in appendix 1 and appendix 2.
- 3.15 **Case definitions** - infectious diseases case definitions for reporting purposes are available on the HAAD website at: <http://www.haad.ae/HAAD/LinkClick.aspx?fileticket=CG2g-0Hh8Ew%3d&tabid=820> Communicable Diseases Case Definitions, treatment and management guidelines for certain communicable diseases that may be defined, published and updated by HAAD from time to time.

4 Duties of Healthcare Facilities and Professionals

4.1 Healthcare Providers must:

- 4.1.2 Have policies and procedures in place to provide quality Public Health data , that are reported by appropriately qualified and trained members of staff. Staff must be assigned clearly defined responsibilities in accordance with the HAAD Provider Policy Manual, Chapter V, General Duties, Governance and Change of Control.

- 4.1.3 Report Public Health data, via the HAAD electronic notification system using the data fields and following the instructions detailed in the notification user manual via: <http://www.haad.ae/haad/tabid/871/Default.aspx> ;
- 4.1.4 Assure the quality of reported data, including, where necessary reviewing the medical records and case history relevant to the notifiable public health data including that the reported data are accurate, complete and reported to HAAD within the time frames specified in this Standard;
- 4.1.5 Seek access to the electronic notification system granted by HAAD upon registration in the e-services reporting system, (Electronic reporting is accessible via e-services on the HAAD website at <http://www.haad.ae>);
- 4.1.6 Submit e-Claims data in accordance with the Data Management Policy, Chapter VI, Healthcare Regulator Policy Manual Version 1.0 and as set out in the HAAD Data Standards (found online at www.haad.ae/datadictionary). Reporting of e-claims data is independent of the reporting of public health statistics;
- 4.1.7 Provide any additional data requested by HAAD personnel with regards to the submitted notification(s);
- 4.1.8 Comply with HAAD policies and standards on managing patient medical records, including developing effective recording systems, maintaining patient records, maintaining confidentiality, adverse event management and reporting, privacy and security of patient information and fulfilling the requirements of patient consent and patients' rights and responsibilities charter;
- 4.1.9 Ensure that necessary, appropriate and timely treatment and management is provided to all cases requiring clinical care in accordance with international evidence based best practices, HAAD Policies and Standards and federal and emirate laws;
- 4.1.10 Where a hard copy of reportable public health data is provided for the legal guardian or retained in the patient records, providers must ensure that this is signed and stamped by an authorised employee (for death events, this must be by the attending physician);
- 4.1.11 Where a death event is caused by a communicable disease, health care providers must submit communicable disease and death notification via the relevant notification systems; and
- 4.1.12 Comply with HAAD requests to inspect and audit records and cooperate with HAAD authorised auditors, as required for inspections and audits by HAAD.

5 Enforcement and Sanctions

5.1 Healthcare providers must comply with the requirements of this Standard, the HAAD Standard Provider Contract and the HAAD Data Standards and Procedures. HAAD may impose sanctions in relation to any breach of requirements under this standard in accordance with Chapter IX, HAAD *Policy on Complaints, Investigations, Regulatory Action and Sanctions*, The Healthcare Regulator Policy Manual Version 1.0.

6. Reporting Requirements

6.1 Reporting of Public Health Data must be in accordance with the requirements of the following tables:

Table 1. Timeframes for additional reporting requirements

Public Health Data	Timeframe for reporting	Additional reporting requirements
Birth	48 hours	None
Death	72 hours	None
Non-Fatal injury and poisoning	7 days	None
Communicable Diseases Appendix 1 – Group A Table 1	Immediate	<ol style="list-style-type: none"> 1. In accordance with HAAD case definitions for infectious diseases (Appendix 2) 2. Suspected and confirmed cases must be reported
Communicable Diseases Appendix 1 – Group B Table 2	One calendar day	<ol style="list-style-type: none"> 1. In accordance with HAAD case definitions for infectious diseases (Appendix 2) 2. Suspected and confirmed cases must be reported
Communicable Diseases Appendix 1 – Group C Table 3	Seven calendar days	<ol style="list-style-type: none"> 1. In accordance with HAAD case definitions for infectious diseases (Appendix 2) 2. Suspected and confirmed cases must be reported

Table 2. List of notifiable communicable diseases

<input type="checkbox"/> AFP/ Poliomyelitis 📧 1	<input type="checkbox"/> Leprosy (Hansen Disease) 📧 1
<input type="checkbox"/> Amebiasis 📧 7	<input type="checkbox"/> Listeriosis 📧 7
<input type="checkbox"/> Anthrax 📞 📧	<input type="checkbox"/> Malaria 📧 1
<input type="checkbox"/> Botulism 📞 📧	<input type="checkbox"/> Measles (Rubeola) 📧 1
<input type="checkbox"/> Brucellosis 📧 1	<input type="checkbox"/> Meningitis Specify Etiology: 📧 1
<input type="checkbox"/> Chickenpox 📧 7	<input type="checkbox"/> Viral
<input type="checkbox"/> Cholera 📞 📧	<input type="checkbox"/> Bacterial
<input type="checkbox"/> Coronavirus (Novel) 📞 📧	<input type="checkbox"/> Mumps 📧 7
<input type="checkbox"/> Dengue Fever 📞 📧	<input type="checkbox"/> Pertussis (Whooping Cough) 📧 1
<input type="checkbox"/> Diphtheria 📞 📧	<input type="checkbox"/> Plague 📞 📧
<input type="checkbox"/> Encephalitis, Specify Etiology: 📧 1	<input type="checkbox"/> Rabies 📞 📧
<input type="checkbox"/> Viral	<input type="checkbox"/> Relapsing Fever 📧 1
<input type="checkbox"/> Bacterial	<input type="checkbox"/> Rubella (German Measles) 📧 1
<input type="checkbox"/> Escherichia coli (Enterohemorrhagic): 📧 1	<input type="checkbox"/> Rubella Syndrome, Congenital 📧 1
<input type="checkbox"/> Food borne illness 📞 📧 Specify:	<input type="checkbox"/> Scabies 📧 7
<input type="checkbox"/> Giardiasis 📧 7	<input type="checkbox"/> Scarlet Fever 📧 7
<input type="checkbox"/> Haemophilus influenzae invasive disease 📧 1	<input type="checkbox"/> Severe Acute Respiratory Syndrome (SARS) 📞 📧
<input type="checkbox"/> Hepatitis A 📧 1	<input type="checkbox"/> Sexually Transmitted Infection (STIs) <input type="checkbox"/>
	<input type="checkbox"/> Chlamydia <input type="checkbox"/> Chancroid <input type="checkbox"/> Gonorrhoea
	<input type="checkbox"/> Genital Warts <input type="checkbox"/> Herpes Simplex <input type="checkbox"/> Syphilis <input type="checkbox"/>
	<input type="checkbox"/> Trichomoniasis
	<input type="checkbox"/> Other, 📧 7 specify.....
<input type="checkbox"/> Hepatitis B (specify acute case or chronic) 📧 7	<input type="checkbox"/> Shigellosis 📧 1
<input type="checkbox"/> Hepatitis C (specify acute case or chronic) 📧 7	<input type="checkbox"/> Smallpox (Variola) 📞 📧
<input type="checkbox"/> Hepatitis D (Delta) 📧 7	<input type="checkbox"/> Tetanus 📧 7
<input type="checkbox"/> Hepatitis E 📧 1	<input type="checkbox"/> Tuberculosis (Pulmonary) 📞 📧
<input type="checkbox"/> Human Immunodeficiency Virus (HIV)/AIDS 📞 📧	<input type="checkbox"/> Tuberculosis (Extra-Pulmonary) 📧 7
<input type="checkbox"/> Influenza 📧 7	<input type="checkbox"/> Typhoid /Paratyphoid Fever 📧 1
<input type="checkbox"/> Influenza - Avian (human) 📞 📧	<input type="checkbox"/> Typhus Fever 📧 1
<input type="checkbox"/> Influenza –H1N1 📞 📧	<input type="checkbox"/> Viral Hemorrhagic Fever 📞 📧
<input type="checkbox"/> Invasive Pneumococcal Disease (IPD) 📧 7	<input type="checkbox"/> Yellow Fever 📞 📧
<input type="checkbox"/> Legionellosis 📧 1	<input type="checkbox"/> Occurrence of any unusual diseases 📞 📧 specify

Group A 📞 📧 = Report immediately by telephone & electronic notification

Group B 📧 1 = Report by Electronic notification within one calendar day of identification

Group C 📧 7 = Report by electronic notification within seven calendar days of identification

NB: All notifications (suspected and confirmed) must be reported via:

<https://bpmweb.haad.ae>

Appendices

Appendix 1 - All notifications (suspected and confirmed) must be reported via:

<https://bpmweb.haad.ae>

Appendix 2 - - HAAD Communicable diseases Case Definitions

<http://www.haad.ae/HAAD/LinkClick.aspx?fileticket=CG2g-0Hh8Ew%3d&tabid=820>